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APPLICANTS

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** CONTINUING DATA *****

This application is a 371 of PCT/GB00/00208 01/26/2000

** FOREIGN APPLICATIONS *****

UNITED KINGDOM 9901711.3 01/26/1999

UNITED KINGDOM 9917443.5 07/23/1999

UNITED KINGDOM 9917445.0 07/23/1999

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials <i>FCM</i>	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 4	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 2
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TITLE

Protective cover for injured limbs

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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